ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY

W-02682A
Tierra Linda Homeowners Association
14305 Blue Spruce Court 6 2 6 2 M. SWAN RU.
Suite 125
Orland Park IL 604622099
TUCSON, AZ B5718

RECEIVED

MAR 2 2 2004

AZ CORPORATION COMMISSION DIRECTOR OF UTILITIES

ANNUAL REPORT

FOR YEAR ENDING

12 31 2003

FOR COMMISSION USE

Ann04 03

COMPANY INFORMATION

Mailing Address 6262 N	1. SWAN	LUI JULIU		
Mailing Address 6262 N (Street) 74650N (City)		A Z	89	5718
(City)		(State)	(Zip	5718
520-529	-1330	520-529-1312	520-977	-4860
Gelephone No. (Include Area Code)		Fax No. (Include Area Code)	Pager/Cell No. (Inc	clude Area Code)
mail Address RPZAM	MITEM	SN. COM		
and Office Mailing Address	SOME			
ocal Office Mailing Address	(Stre	et)	-	
	SAME	(State)	(Zip)	
(City)		(State)	(Z.p)	
	SAME	Fax No. (Include Area Code)	Pager/Cell No	. (Include Area Code)
ocal Office Telephone No. (Include Area	Code)	Fax No. (Include Area Code)	r agen een mo	. (Morado / Maa 3 3 3 5)
Email Address	SAME			
anan Addiess		GEMENT INFORMATION	<u>ON</u>	
	MANAC			DENT
Management Contact:	MANA(GEMENT INFORMATION F. P. ZAMMIT (Name)		
	MANA(TP. ZAMMIT (Name)	PRESII (Tit	le)
	MANA(
Management Contact:	MANAC	(Name)	PRESII (Tit	(Zip)
Management Contact:	MANA(TP. ZAMMIT (Name)	PRESII (Tit	(Zip)
Management Contact: (Street) Telephone No. (Include Area Code)	MANA((Name)	PRESII (Tit	(Zip)
Management Contact:	MANAC ROBER SAME SAME	(Name)	PRESII (Tit	(Zip)
Management Contact:	MANA(ROBER: SAME SAME SAME	(Name)	PRESII (Tit	(Zip)
Management Contact:	MANA(ROBER: SAME SAME SAME	(Name) Fax No. (Include Area Code) (Name)	PRESII (Title) (State) Pager/Cell No. (Inc.)	(Zip)
Management Contact:	MANA(ROBER SAME SAME SAME SAME SAME	(Name) (City) Fax No. (Include Area Code)	PRESII (Tit	(Zip)
(Street) Telephone No. (Include Area Code) Email Address On Site Manager: (Street)	MANA(ROBER: SAME SAME SAME SAME SAME SAME SAME	(Name) (City) Fax No. (Include Area Code) (Name) (City)	PRESII (Tit.) (State) Pager/Cell No. (Inc.) (State)	(Zip)
Management Contact:	MANA(ROBER: SAME SAME SAME SAME SAME SAME SAME	(Name) Fax No. (Include Area Code) (Name)	PRESII (Title) (State) Pager/Cell No. (Inc.)	(Zip)

Statutory Agent: ROBERT P.	ZAMMIT	
	(Name)	Turish 42 86710
(Street) 520 - 529 - 1330 Telephone No. (Include Area Code)	(City)	(State) (Zip)
(Street)	520-529-1312	520-977-4B60
Telephone No. (Include Area Code)	Fax No. (Include Area Code	Pager/Cell No. (Include Area Code)
Attorney: THOMAS P. 2525 E. BROADWAY, (Street)	(Name)	
2525 E. BROADWAY	SUITE 102, TUCSON	1, AZ 85716
(Street)	(City)	(State) (Zip)
520 - 322 - 5511 Telephone No. (Include Area Code)	920 - 322 - 0777 For No (Include Area Code)	520 - 248 - 850 / Pager/Cell No. (Include Area Code)
Telephone No. (Include Area Code)	Fax No. (Include Alea Code)	ragen centro. (mondo raca codo)
☑ Please mark this box if the abov filing.	re address(es) have change	ed or are updated since the las
OWN	ERSHIP INFORMATIO	<u>N</u>
Check the following box that applies to yo	ur company:	
Sole Proprietor (S)	C Corporation (C	(Other than Association/Co-op)
Partnership (P)	☐ Subchapter S Cor	poration (Z)
☐ Bankruptcy (B)	Association/Co op	(A)
Receivership (R)	Limited Liability	Company
Other (Describe)		
	COUNTIES SERVED	
Check the box below for the county/ies in	which you are certificated to pro	ovide service:
П АРАСНЕ	☐ COCHISE	☐ COCONINO
☐ GILA	☐ GRAHAM	☐ GREENLEE
☐ LA PAZ	☐ MARICOPA	☐ MOHAVE
☐ NAVAJO	⋈ PIMA	☐ PINAL
CANTRA CIDALIZA		☐ YUMA
☐ SANTA CRUZ	∐ YAVAPAI	I OWA

UTILITY PLANT IN SERVICE

Acct.		Original	Accumulated	O.C.L.D.
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS			NONE

This amount goes on the Balance Sheet Acct. No. 108

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS			NONE

This amount goes on Comparative Statement of Income and Expense ____ Acct. No. 403.

COMPANY NAME TIERRA LINDA HOMEOWNERS ASSOCIATION

BALANCE SHEET

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	ASSETS	YEAR	IEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$	\$
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$	\$
	FIXED ASSETS		
101	Utility Plant in Service	\$	\$
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant		
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$	\$
	TOTAL ASSETS	\$	\$ NONE

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

COMPANY NAME TIERRALINDA HOMEOWNERS ASSOCIATION

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	LIABILITIES	ILAK	TEAK
	CURRENT LIABILITES		
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
211	TOTAL CURRENT LIABILITIES	\$	\$
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$	\$
	Long-1 chii 1 votes and Bones		
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$	\$
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	\$
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings		
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$	\$
	TOTAL LIABILITIES AND CAPITAL	\$	\$ NONE

COMPANY NAME TIERRA LINDA HOMEOWNERS ASSOCIATION

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
No.			<u></u>
461	Metered Water Revenue	\$	\$
460	Unmetered Water Revenue		
474	Other Water Revenues		
	TOTAL REVENUES	\$	\$
	OPERATING EXPENSES		
601	Salaries and Wages	\$	\$
610	Purchased Water		
615	Purchased Power		
618	Chemicals		
620	Repairs and Maintenance		
621	Office Supplies and Expense		
630	Outside Services		
635	Water Testing		
641	Rents		
650	Transportation Expenses		
657	Insurance – General Liability		
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense		
403	Depreciation Expense		
408	Taxes Other Than Income		
408.11	Property Taxes		
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$	\$
	OPERATING INCOME/(LOSS)	\$	\$
	OFFICE INCOME (EXPENSE)		
45.0	OTHER INCOME/(EXPENSE)	\$	\$
419	Interest and Dividend Income	Φ	Ψ
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense	\$	\$
	TOTAL OTHER INCOME/(EXPENSE)	Φ	Ψ
	NET INCOME/(LOSS)	\$ NONE	\$ NONE

COMPANY NAME TIERRA LINDA HOMEOUNNERS ASSOCIATION

SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate				
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End	\$ NONE	
Meter Deposits Refunded During the Test Year	\$ NONE	

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (Gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
NONE						

Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)

BOOSTER PUMPS		FIRE HYDRANTS		
Horsepower	Quantity	Quantity Standard	Quantity Other	

STORAGE TANKS		PRESSURE TANKS		
Capacity	Quantity	Capacity	Quantity	

COMPANY NAME TIERRA LINDA HOMEOWNERS ASSOCIATION

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

Size (in inches)	Material	Length (in feet)
2		Length (in feet)
3		11
4		
5		/1
6		11
8		t ș
10		Q
12		11
		-

CUSTOMER METERS

Quantity		
NONE		
4		
11		
(1		
//		
11		
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11		
ll .		
/1		
()		

For the following three items, list the utility owned assets in each category.

TREATMENT EQUIPMENT:		
NONE:		
STRUCTURES:		
140)4		
OTHER:		
790742		

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2003

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD	GALLON PUMPED (Thousands)
JANUARY	NONE		
FEBRUARY	(1		
MARCH	"		
APRIL	u		
MAY	11		
JUNE	"		
JULY	11		
AUGUST	4		
SEPTEMBER	/(
OCTOBER	ı,		
NOVEMBER	11		
DECEMBER	11		
	TOTAL	N/A	

Is the Water Utilit	y located in an ADWI	R Active Management Ar	ea (AMA)?
() Yes	() No		
Does the Compan	ny have An ADWR Ga	llons Per Capita Per Day	(GPCPD) requirement?
() Yes	() No		
If yes, provide the	GPCPD amount:		
What is the level of		l on your system.	mg/l

Note: If you are filing for more than one system, please provide separate data sheets for

each system.

COMPANY NAME TIERRA LINDA HOMEOWNERS ASSOC. YEAR ENDING 12/31/2003 PROPERTY TAXES Amount of actual property taxes paid during Calendar Year 2003 was: \$ # 13. & Z Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year. If no property taxes paid, explain why._____

COMPANY NAME TIERRA LINDA HOMEOWNERS 4550C. YEAR ENDING 12/31/2003

PRINTED NAME

INCO	OME TAXES
For this reporting period, provide the following:	
Federal Taxable Income Reported Estimated or Actual Federal Tax Liability	NONE
State Taxable Income Reported Estimated or Actual State Tax Liability	NONE
Amount of Grossed-Up Contributions/Advances:	
Amount of Contributions/Advances Amount of Gross-Up Tax Collected Total Grossed-Up Contributions/Advances	NONE
the tax year when tax returns are completed. Pursu	ill refund any excess gross-up funds collected at the close of tant to this Decision, if gross-up tax refunds are due to any een made, attach the following information by Payer: name of gross-up tax collected, the amount of refund due to each as made the refund to the Payer.
CERTIFICATION	
prior year's annual report. This certification is to	s refunded to Payers all gross-up tax refunds reported in the be signed by the President or Chief Executive Officer, if a partnership; the managing member, if a limited liability hip.
SIGNATURE	3-17-04 DATE
PARAT P ZAMMIT	PRESIDENT

TITLE

VERIFICATION AND SWORN STATEMENT Intrastate Revenues Only

RECEIVED

MAR 22 2004

VERIFICATION	COUNTY OF (COUNTY NAME)		Olasinana con andissio
STATE OF APIZONA	PMA NAME (OWNER OR OFFICIAL) TITLE	\$Z CORPORA	TION COMMISSIO OR OF UTILITIES
I, THE UNDERSIGNED	ROBERT P. ZAMMIT,	PRESIDEN T	
OF THE	COMPANY NAME TIEDRA LINDA HOMEOW.	NERS ASSOC.	
DO SAY THAT THIS ANNUAL	UTILITY REPORT TO THE AR	IZONA COPRORATION C	<u>OMMISSION</u>
FOR THE YEAR ENDING	MONTH DAY 12 31	YEAR 2003	
PAPERS AND RECO THE SAME, AND I STATEMENT OF BU COVERED BY THIS I	ED UNDER MY DIRECTION OF SAID UTILITY; THE SAME TO USINESS AND AFFAIRS OF THE SERVICE OF MY KNOWLEDGE	HAT I HAVE CAREFUL BE A COMPLETE A F SAID UTILITY FOR ACH AND EVERY MATT	LY EXAMINED AND CORRECT R THE PERIOD TER AND THING
SWORN STATEMENT			
401, ARIZONA REVI OPERATING REVEN	ITH THE REQUIREMENT OF SED STATUTES, IT IS HE UE OF SAID UTILITY DEFENSE DURING CALENDAR YEAR	REIN REPORTED THA RIVED FROM <u>ARIZON</u>	AT THE GROSS
	Arizona IntraSt	ate Gross Operating Revenues Onl	y (\$)
	INCLUDES \$	INT IN BOX ABOVE AXES BILLED, OR COL	LECTED
**REVENUE REPORTED ON THIS P. INCLUDE SALES TAXES BILLED (COLLECTED. IF FOR ANY OTHE. THE REVENUE REPORTED ABOV AGREE WITH TOTAL OPERATING ELSEWHERE REPORTED, ATTAC STATEMENTS THAT RECONCILI DIFFERENCE. (EXPLAIN IN DETA	OR R REASON, E DOES NOT G REVENUES TH THOSE THE SIGNATURE OF OWNER	}	
SUBSCRIBED AND SWORN TO BE		1	
A NOTARY PUBLIC IN AND FOR T	HE COUNTY OF COUNTY NAME	KinA	
THIS 17	DAY OF MONTH MAK	90h 2004	
(SEAL) MY COMMISSION EXPIRES	OFFICIAL SEA BERNICE I. LANDRY NOTARY PUBLIC ARIZONA	TURE OF NOTARY PUBLIC	_

My Comm. Expires 7-24-2007

VERIFICATION **AND SWORN STATEMENT**

RECEIVED

MAR 22 2004

		RE	SIDENTL	AL REVEN	IUE	MAN 2, 2, 2001
VERIFICATI	ON	IN	ΓRASTATE R	EVENUES ON	LY \Z	CORPORATION COMMISSIO DIRECTOR OF UTILITIES
STATE OF A	RIZONA	(COUNTY	NAME) P	MA		
I, THE UNDE	ERSIGNED	NAME (OWNER OF AS	ROFFICIAL)	MIT		PRESIDEN T
OF THE		COMPANY NAME TIERNA	LINDA HE	OMEOWNER	s Assi	DC.
DO SAY THA	T THIS ANNU	AL UTILITY	REPORT TO	THE ARIZO	ONA CO	RPORATION COMMISSION
FOR THE YE.		MONTH 12	DAY 31	YEAR 2003		
RECOL THE S.	RDS OF SAID AME TO BE A IY FOR THE ER AND THI	UTILITY; THE COMPLETE	HAT I HAVE AND CORRE VERED BY	CAREFULLY CT STATEM! THIS REPO!	(EXAM ENT OF RT IN R	ORIGINAL BOOKS, PAPERS AND INED THE SAME, AND DECLARE BUSINESS AND AFFAIRS OF SAID RESPECT TO EACH AND EVERY OWLEDGE, INFORMATION AND
SWORN S	FATEMEN	T				
ARIZONA R	EVISED STA	ATUTES, IT I	IS HEREIN VED FROM	REPORTED ARIZONA I	THAT NTRAS	TICLE 8, SECTION 40-401 <u>.01,</u> THE GROSS OPERATING STATE UTILITY OPERATIONS DAR YEAR 2003 WAS:
ARIZONA II	NTRASTATE GRO	SS OPERATING R	EVENUES	ÌNCLUD	ES \$	IN BOX AT LEFT S BILLED, OR COLLECTED
	ITIAL REVEN CLUDE SALE			AGE	SIG	PRESIDENT F
	SUBSCRIBE	D AND SWOR	N TO BEFOR	E ME	KZ-KN	PUBLIC NAME
	A NOTARY I	PUBLIC IN AN		COUNTY OF Y OF	MONTH	MARCOLO 1.20 14
	(SEAL) MY COMMI	SSION EXPIR	BERN NOTARY	FFICIAL SEAL ICE I. LANDRY PUBLIC – ARIZ	Enn.	CC C SAMARY SIGNATURE OF NOTARY PUBLIC